

Fill in this information to identify the case:

Debtor 1 AMANDA D DANUSKI

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: Middle District of Pennsylvania

Case number 19-05163

Official Form 410

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>Ascendium Education Solutions, Inc</u> Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Ascendium Education Solutions, Inc</u> Name <u>PO Box 8961</u> Number Street <u>Madison WI 53708</u> City State ZIP Code Contact phone <u>800-874-8982</u> Contact email <u>GA-Bankmail@AscendiumEducation.org</u>	Where should payments to the creditor be sent? (if different) <u>Ascendium Education Solutions, Inc</u> Name <u>PO Box 809142</u> Number Street <u>Chicago IL 60680</u> City State ZIP Code Contact phone <u>800-874-8982</u> Contact email <u>GA-Bankmail@AscendiumEducation.org</u>
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on ____ / ____ / ____	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>0</u> <u>3</u> <u>2</u> <u>3</u>
7. How much is the claim?	\$ <u>70,700.08</u> Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Guaranteed Student Loans</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.) Amount necessary to cure any default as of the date of the petition: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 12/06/2019
MM / DD / YYYY

/s/ Linda S Bitz

Signature

Print the name of the person who is completing and signing this claim:

Name Linda S Bitz

First name

Middle name

Last name

Title Bankruptcy Filings Specialist 2

Company Ascendium Education Solutions, Inc

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address PO Box 8961

Number

Street

Madison

City

WI

State

53708

ZIP Code

Contact phone 800-874-8982

Email GA-Bankmail@AscendiumEducation.org

12-06-19 11:27

Default Summary

GWIN114A A

Monetary Data

Page 1

Borr Acct Id [REDACTED] 0323 3 Guar Nr 755 Name DANUSKI, AMANDA D
 Coll Id Nr 00000 PTP Coll Id Nr 00000 PTP Dt
 Orig Dflt Dt 09-18-17 Prin Pd Fed 0.00 Last Pmt At 10,833.87
 Last Dflt Dt 09-18-17 Prin Unpd Fed 54,331.41 Last Pmt Dt 09-18-17
 PIF Dt Prin Pd Guar 0.00 Last Pmt Type Cd NP
 Cons Int Pt 7.14 Prin Unpd Guar 0.00 Mo Pmt At 0.00
 P/I Pd Fed 0.00 Rtrn Chk Qy 0
 Clm Type Cd 01 P/I Unpd Fed 0.00 Coll Agency Nr 041
 Clm Prin Pd 40,885.13 P/I Pd Guar 0.00 Bkrpt Dis Dt
 Clm Int Pd 11,816.31 P/I Unpd Guar 0.00 Prin Dis At 0.00
 Lgl Fee Pd 0.00 Acc Thru Dt 09-18-17 Prin Dis Pd 0.00
 LglFee Unpd 0.00 A/I Pd Fed 0.00 P/I Dis At 0.00
 Oth Fee Pd 0.00 A/I Unpd Fed 0.00 P/I Dis Pd 0.00
 OthFee Unpd 0.00 A/I Pd Guar 0.00 A/I Dis At 0.00
 NonReim Fee 0.00 A/I Unpd Guar 0.00 A/I Dis Pd 0.00
 RptTotFeePd 0.00 Prin Ncol Fed 0.00 Int Ncol Fd 0.00
 AWG Status Prin Ncol Guar 0.00 Int Ncol Gr 0.00
 PayoffColFee 7,782.36 Stoff Fee Pd 0.00 RptStFeeUpd 0.00
 Stoff Fee Unpd 0.00 RptLgFeeUpd 0.00
 Payoff At 70,700.08 As Of 12 05 19 RptOtFeeUpd 0.00
 ENTER NEW PAYOFF DATE TO RECALCULATE PAYOFF AMT, PF12 PAGE FORWARD, PF22=EDGAR
 A DEMO AND/OR LOAN HOLD EXISTS FOR THIS ACCOUNT

4-© §	A	Sess-1	172.27.64.65	TCPS0872	#§3/15
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Ascendium Education Solutions, Inc.
PO Box 8961
Madison WI 53708-8961

SS # 0323
Name AMANDA D DANUSKI

1a	Principal Due	54,331.41
2	Interest Due	8,586.31
3	Collection Fees Due	7,782.36
4	Proof of Claim Amt	70,700.08

Principal Calculation

1	Prin Unpd Fed	54,331.41
1	Prin Unpd Guar	0.00
1a	Principal Due	54,331.41

Interest Calculation

4	Payoff At (as of bankruptcy file date)	70,700.08
3	Payoff Coll Fee (Collection Fees Due)	7,782.36
1a	Principal Due	54,331.41
2	Interest Due	8,586.31

Application Dates

1	7/12/2007
2	7/13/2007
3	11/28/2007
4	8/8/2008
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Federal Family Education Loan Program (FFELP)

Guarantor, Program, or Lender Identification

OMB No. 1815-0006
Form approved
Exp. date 2-29-2008Federal Stafford Loan
Master Promissory Note**WARNING:** Any person who knowingly makes a false statement or misrepresentation on this form is subject to penalties which may include fines, imprisonment, or both, under the United States Criminal Code and 20 U.S.C. 1097.

Borrower Information

Please print neatly or type. Read the instructions carefully.

1. Last Name First Name MI 2. Social Security Number
 DANUSKI AMANDA 0323

3. Permanent Street Address (If P.O. Box, see instructions.) 4. Home Area Code/Telephone Number 5. Date of Birth (Month/Day/Year)

6. Lender Name City State Zip Code 7. Lender Code, if known
 CITIBANK N.A. ROCHESTER NY 14692-2943 824756

10. References: You must provide two separate references with different U.S. addresses. The first reference should be a parent (if living) or legal guardian. Both references must be completed in full.

Name A.
 Permanent Address
 City, State, Zip Code
 E-mail Address
 Area Code/Telephone Number
 Relationship to Borrower

11. Requested Loan Amount: I request a total amount of subsidized and unsubsidized loans under this Master Promissory Note not to exceed the allowable maximums under the Higher Education Act. My school will notify me of the type(s) and amount(s) of loan(s) that I am eligible to receive. I may cancel my loan or request a lower amount by contacting my lender or school. Additional information about my right to cancel a loan or request a lower amount is included in the Borrower's Rights and Responsibilities Statement and Disclosure Statements that have been or will be provided to me.

12. Interest Payments (Optional):

☐ I want to pay unsubsidized interest while I am in school.

Borrower Certifications and Authorizations

Read carefully before signing below.

13. Under penalty of perjury I certify that:

A. The information I have provided on this Master Promissory Note and as updated by me from time to time is true, complete, and correct to the best of my knowledge and belief and is made in good faith.

B. I will immediately repay any loan proceeds that cannot be attributed to educational expenses for attendance on at least a half-time basis at the school that certified my loan eligibility.

C. (i) I do not now owe an overpayment on a Federal Pell Grant, Supplemental Educational Opportunity Grant, or a Leveraging Educational Assistance Partnership Grant (formerly State Student Incentive Grant); or, if I owe an overpayment, I have made repayment arrangements with the holder to repay the amount owed. (ii) I am not now in default on any loan received under the Federal Perkins Loan Program (including NDSL loans), the Federal Direct Loan Program, or the Federal Family Education Loan Program ("FFELP" as defined in the Borrower's Rights and Responsibilities Statement); or (iii) I am in default on a loan, and I have made satisfactory arrangements with the holder of the defaulted loan.

14. For all subsidized and unsubsidized Federal Stafford Loans (as described in the additional MPN provisions and the Borrower's Rights and Responsibilities Statement) I receive under this Master Promissory Note, and for certain other loans as described below, I make the following authorizations:

A. I authorize my school to certify my eligibility for loans under this Master Promissory Note.

B. I authorize my school to transfer loan proceeds received by electronic funds transfer (EFT) or master check to my student account.

C. I authorize my school to pay to the lender any refund that may be due up to the full amount of the loan(s).

D. I authorize the lender, the guarantor, or their agents, to investigate my credit record and report information concerning my loan status to persons and organizations permitted by law to receive such information.

E. I request and authorize my lender to: (i) during the in-school and grace periods of any loans made under this Master Promissory Note, defer and align the repayment of principal on all of my FFELP loans that are in repayment status; and (ii) add unpaid interest that accrues on all my FFELP loans to the principal balance of such loans ("capitalization") including such loans made under this Master Promissory Note, during forbearance periods, and for unsubsidized loans, during in-school, grace, and deferment periods as provided under the Act. "Capitalization" will increase the principal balance on my loans and the total amount of interest charges I must pay.

F. I authorize the release of information pertinent to my loans: (i) by the school, the lender, and the guarantor, or their agents, to the references on the applicable loans and to members of my immediate family unless I submit written directions otherwise; and, (ii) by and among my schools, lenders, guarantors, the Department of Education, and their agents.

G. So that the loans requested can be approved, I authorize the Department of Education to send any information about me that is under its control, including information from the Free Application for Federal Student Aid, to the school, the lender, and to state agencies and nonprofit organizations that administer financial aid programs under the FFELP.

Promise to Pay In this Master Promissory Note (MPN), "lender" refers to, and this MPN benefits, the original lender and its successors and assigns, including any subsequent holder of this MPN.

15. I promise to pay to the order of the lender all loan amounts disbursed under the terms of this MPN, plus interest and other charges and fees that may become due as provided in this MPN. I understand that multiple loans may be made to me under this MPN. I understand that by accepting any disbursements issued at any time under this MPN, I agree to repay the loans. I understand that, within certain time frames, I may cancel or reduce the amount of any loan by refusing to accept or by returning all or a portion of any disbursement that is issued. Unless I make interest payments, interest that accrues on my unsubsidized loans during in-school, grace, and deferment periods will be added as provided under the Act to the principal balance of such loans. If I do not make any payment on any loan made under this MPN when it is due, I will also pay reasonable collection costs, including but not limited to attorney's fees, court costs, and other fees. I will not sign this MPN before reading the entire MPN, even if I am told not to read it, or told that I am not required to read it. I am entitled to an exact copy of this MPN and the Borrower's Rights and Responsibilities Statement. My signature certifies I have read, understand, and agree to the terms and conditions of this MPN, including the Borrower Certifications and Authorizations printed above, the Notice About Subsequent Loans Made Under This MPN, and the Borrower's Rights and Responsibilities Statement.

I UNDERSTAND THAT I MAY RECEIVE ONE OR MORE LOANS UNDER THIS MPN, AND THAT I MUST REPAY ALL LOANS THAT I RECEIVE UNDER THIS MPN.

16. Borrower's Signature Amanda Danuski17. Today's Date (Month/Day/Year) 7/1/07

Federal Family Education Loan Program (FFELP)**Federal PLUS Loan****Application and Master Promissory Note**

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form is subject to penalties which may include fines, imprisonment, or both, under the United States Criminal Code and 20 U.S.C. 1097.

Guarantor, Program, or Lender identification

OMB No.1845-0069
Form approved
Exp. date 03/31/2008**Borrower (Parent) Section***Please print neatly in ink or type. Read the instructions carefully.*

1. Last Name DANUSKI	First Name AMANDA	MI D	2. Social Security Number 0323
3. Permanent Street Address (If P.O. Box, see instructions.) [Redacted]			4. Home Area Code/Telephone Number [Redacted]
9. Lender Name CITIBANK N.A.	City ROCHESTER	State NY	Zip Code 14692-2943
10. Lender Code, if known 824756			12. Employer Telephone Number [Redacted]
11. Employer (Name, Address, City, State, Zip) [Redacted]			13. Borrower References: You must provide two separate references with different U.S. addresses who have known you for at least three years. Both references must be completed in full. Do not list the student as a reference.

Name
Permanent Address
City, State, Zip Code
E-mail Address
Area Code/Telephone Number
Relationship to Borrower

Student Information Section

14. [Redacted]
15. [Redacted]

Borrower Request, Certifications, and Authorizations*Read carefully before signing below.*

17. **Requested Loan Amount:** This is an Application and Master Promissory Note (hereafter, "MPN") for one or more Federal PLUS Loans. I request a Federal PLUS Loan under this MPN in an amount not to exceed the annual cost of attendance for the student identified in the Student Information Section of this MPN, minus other financial aid that the student receives each academic year. For each loan, the school will notify me of the loan amount that I am eligible to receive. I may cancel my loan or request a lower amount by contacting my lender or the school. Additional information about my right to cancel a loan or request a lower amount is included in the Borrower's Rights and Responsibilities Statement and disclosure statements that have been or will be provided to me. If I have an adverse credit history and obtain an endorser to receive a PLUS Loan, only one loan may be made to me under this MPN.
18. Under penalty of perjury, I certify for any loan I receive under this MPN that:
- A. The information I have provided on this MPN and as updated by me from time to time is true, complete, and correct to the best of my knowledge and belief and is made in good faith.
 - B. I am: (i) the biological or adoptive parent; or (ii) the spouse of a parent and my income and assets were reported on the Free Application for Federal Student Aid (FAFSA) or would be reported if a FAFSA were filed.
 - C. Loan proceeds will be used for authorized educational costs incurred by the dependent student named in the Student Information Section and that I will immediately repay any loan proceeds that cannot be attributed to educational costs for attendance on at least a half-time basis at the school that certified my loan eligibility.
 - D. (i) I do not now owe an overpayment on a Federal Pell Grant, Federal Supplemental Educational Opportunity Grant, or Leveraging Educational Assistance Partnership Grant (formerly State Student Incentive Grant); or, if I owe an overpayment, I have made repayment arrangements with the holder to repay the amount owed; (ii) I am not now in default on any loan received under the Federal Perkins Loan Program (including NDSL loans), the Federal Direct Loan Program, or the Federal Family Education Loan Program ("FFELP" as defined in the Borrower's Rights and Responsibilities Statement); or I am in default on a loan and I have made satisfactory payment arrangements with the holder of the defaulted loan.
19. For all Federal PLUS Loans (as described in the additional MPN provisions and the Borrower's Rights and Responsibilities Statement) I receive under this MPN, and for certain other loans as described below, I make the following authorizations:
- A. I authorize the school to certify my eligibility for Federal PLUS Loans under this MPN.
 - B. I authorize the lender, the guarantor, or their agents, to investigate my credit record and report information concerning my loan status to persons and organizations permitted by law to receive such information.
 - C. I authorize the school to pay to the lender any refund that may be due up to the full amount of the loan(s).
 - D. I authorize the school to transfer loan proceeds received by electronic funds transfer (EFT) or master check to my dependent student's account at the school.
 - E. I may tell my lender that I want to pay the interest that accrues. However, in all cases, unless I pay the interest, my lender will add the unpaid interest that accrues during forbearance and deferment and other periods on each PLUS Loan made under this MPN to the principal balance of that loan ("capitalization") as provided under the Act. Capitalization will increase the principal balance on my loan(s) and the total amount of interest costs I must pay.
 - F. I authorize the release of information pertinent to my loan(s): (i) by the school, the lender, and the guarantor, or their agents, to the references on the applicable loan(s) and to members of my immediate family unless I submit written directions otherwise; and (ii) by and among the schools, lenders, guarantors, the U.S. Department of Education (the Department), and their agents.
 - G. So that the loan(s) requested can be approved, I authorize the Department to send any information about me that is under its control, including information from the FAFSA, to the school, to the lender, and to state agencies and nonprofit organizations that administer financial aid programs under the FFELP. I understand that information reported on this MPN may be shared with the Department, and that the Department has the authority to verify that information with other federal agencies.
 - H. I authorize my lender to defer repayment of principal on my loan(s) based on my in-school status.

Promise to Pay *In this MPN, "lender" refers to, and this MPN benefits, the original lender and its successors and assigns, including any subsequent holder of this MPN.*

20. I promise to pay to the order of the lender all loan amounts disbursed (hereafter "loan" or "loans") under the terms of this Application and Master Promissory Note (hereafter "MPN"), plus interest and other charges and fees that may become due as provided in this MPN. I understand that multiple loans may be made to me under this MPN for the dependent identified in the Student Information Section. I understand that by accepting any disbursements issued at any time under this MPN, I agree to repay the loan(s). I understand that, within certain time frames, I may cancel or reduce the amount of any loan by refusing to accept or by returning all or a portion of any disbursement that is issued. Unless I make interest payments, interest that accrues on my loan(s) during deferment or forbearance periods or other periods will be added as provided under the Act to the principal balance of such loan(s). If I fail to make any payment on any loan made under this MPN when due, I will also pay reasonable collection costs, including but not limited to attorney's fees, court costs, and other fees. I will not sign this MPN before reading the entire MPN, even if I am told not to read it, or told that I am not required to read it. I am entitled to an exact copy of this MPN and the Borrower's Rights and Responsibilities Statement. My signature certifies I have read, understand, and agree to the terms and conditions of this MPN, including the Borrower Request, Certifications, and Authorizations printed above, the Notice About Subsequent Loans Made Under This MPN, and the Borrower's Rights and Responsibilities Statement.

I UNDERSTAND THAT I MAY RECEIVE ONE OR MORE LOANS UNDER THIS MPN AND THAT I MUST REPAY ALL LOANS THAT I RECEIVE UNDER THIS MPN.21. Parent Borrower's Signature Amanda D. Danuski22. Today's Date (Month/Day/Year) 10/30/07

RIDER TO PROOF OF CLAIM

1. The Creditor submits this Rider to the attached proof of claim.
2. Included with the proof of claim is a redacted copy of the loan agreement and note establishing Debtor's student loan debt.
3. Debtor's student loan debt is nondischargeable pursuant to section 523(a)(8) of title 11 of the United States Code. As such, Debtor's student loan debt will continue to accrue interest during the pendency of Debtor's bankruptcy case. The Creditor reserves the right to seek, either through its proof of claim or directly against Debtor, any fees, expenses and other costs recoverable under the agreements establishing the Debtor's student loan debt.
4. The Creditor further reserves the right to: (a) alter, amend, update, modify, supplement or otherwise revise this proof of claim in any respect at any time, including to add accrued interests and other recoverable costs and expenses; and (b) file additional proofs of claim for any other liability or indebtedness of Debtor. The Creditor specifically preserves all of its procedural and substantive defenses and rights with respect to any claim that may be asserted against the Creditor by Debtor or any other party in interest in Debtor's bankruptcy case, or any other person or entity whatsoever, including any challenge or defense to the jurisdiction of this Court over any such claim.
5. The filing of this proof of claim is not and should not be construed to be: (a) the Creditor's consent to this Court's jurisdiction for any matter that is beyond the constitutional authority of a bankruptcy court; (b) a waiver or release of the Creditor's rights against any other person liable for all or part of any claim described herein; or (c) a waiver of the right to seek to have the reference withdrawn with respect to any proceedings commenced in this case against or otherwise involving the Creditor (including with respect to any counterclaims to the claims asserted in this proof of claim).

From: web@pamb.uscourts.gov on behalf of [PAMB Web](#)
To: [PAMBml fax](#)
Subject: EDSS filing from Jeanine Peterson for Amanda Danuski on Friday, May 27, 2022 - 12:54
Date: Friday, May 27, 2022 12:54:49 PM

Submitted on Friday, May 27, 2022 - 12:54

Submitted by user: Anonymous

Submitted values are:

Filer's Name: Jeanine Peterson

Debtor's name (if different): Amanda Danuski

Filer's EMail Address: JPeterson@AscendiumEducation.org

Filer's Phone Number: 18008748982

Case number (if known): 19-05163

==Documents==

Document 1:

<http://www.pamb.uscourts.gov/system/files/webform/edss/19-05163%20Application%20with%20COS.pdf>

Document description: Application Requesting Redaction of
Personal Information

==More Documents==

Document 2:

<http://www.pamb.uscourts.gov/system/files/webform/edss/19-05163%20Replacement%20document%20POC%20R.pdf>

Document 2 description: Proposed Redacted POC document

Document 3:

<http://www.pamb.uscourts.gov/system/files/webform/edss/19-05163%20Replacement%20document%20Exhibit%20R.pdf>

Document 3 description: Proposed Redacted Exhibit document

Document 4:

Document 4 description:

Document 5:

Document 5 description:

By entering my name in the box below, I affirm that I am intending to sign
this form with my signature and consent to use this electronic form.: Jeanine
Peterson